

**Maryland State Department of Education**  
Division of Certification and Accreditation  
Division of Special Education/Early Intervention Services  
200 West Baltimore Street  
Baltimore, Maryland 21201

**SHORT TERM SUBSTITUTE DOCUMENTATION LOG**

Nonpublic School: \_\_\_\_\_ Form Completed by: \_\_\_\_\_  
Location Address: \_\_\_\_\_ Title: \_\_\_\_\_  
\_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Reviewed by (MSDE): \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Absent Teacher	Total # of Consecutive Days Absent	Certification Status (See Code)	Absent Teacher's Written Statement of Intention to Return on file ( Y or N)
Name of Short-Term Substitute	Total # of Consecutive Substitute Days	Certification Status (Code)	
Name of Short-Term Substitute	Total # of Consecutive Substitute Days	Certification Status (Code)	
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**Certification Code:** Advance Professional Certificate (APC), Professional Certificate (PC), and Provisional Certificate's Degree (P) or Bachelor of Arts (B) This report is to be maintained on-site for review by the Nonpublic School Approval Branch (NSAB). The report will be reviewed during monitoring visits by the NSAB.  
*Note: Noncompliance is subject to reduction in the approved State rate payment.*